

**DECLARATION FOR PATENT APPLICATIONS
AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name.

I believe I am the original, first, and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled ***Digital Diagnostic Video System for Manufacturing and Industrial Processes*** the specification of which is attached hereto.

I have reviewed and understand the contents of the above specification, including the claims. I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

Application Priority

<u>Country or PCT</u>	<u>Appl. No.</u>	<u>Date of Filing</u>
United States	60/421,492	Oct. 25, 2002
PCT	PCT/US03/033991	Oct. 24, 2003

Power of Attorney

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Cort Flint, Registration No. 27,260; and/or William D. Lee, Jr., Registration No. 22,660; and/or Douglas W. Kim, Registration No. 44,828; and/or Henry S. Jaudon, Registration No. 34,056; and/or Seann P. Lahey, Registration No. 51,910; and/or John A. Demos, Registration No. 52,809; and/or Robert M. Ward, Registration No. 26,517 of the McNAIR LAW FIRM, Post Office Box 10827, Greenville, South Carolina 29603-0827. Please address all correspondence and telephone calls to: Cort Flint, Telephone Number (864) 232-4261.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of

the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Bernard M. McPheely

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Date

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Date

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Michael S. O'Dea

Date

DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
J. Bruce		Cantrell, Jr.	
Inventor's Signature			Date
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Mailing Address			
Greenville City	SC State	29611 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Michael S.		O'Dea	
Inventor's Signature			Date
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.